## FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

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OMB APPROVAL					
OMB Number:	3235-0076				
Expires:					
Estimated average burden					
hours per respons	e16.00				

SEC	USE ONLY
Prefix	Serial
DA	E RECEIVED

22011011 1(0),11112/011
UNIFORM LIMITED OFFERING EXEMPTION
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)
The Spice Depot, Inc.
Filing Under (Check box(es) that apply):
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)
The Spice Depot, Inc.
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
3060 West Post Road, Las Vegas, Nevada 89118 800-960-2341
Address of Principal Business Operations (Number and Street, City, State, Zip Code)  (if different from Executive Offices)  (Number and Street, City, State, Zip Code)
Brief Description of Business  Manufacturing and Marketing of Spice Products
Type of Business Organization  Corporation  Imited partnership, already formed  business trust  limited partnership, to be formed  other (please specify):
Actual or Estimated Date of Incorporation or Organization: 02 02 ESEL [Varisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:
CN for Canada; FN for other foreign jurisdiction)
GENERAL INSTRUCTIONS
THOMSON Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.5 FINANCISE. S.C. 77d(6).
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date of

which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### - ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ■ Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Darrell Bowen Business or Residence Address (Number and Street, City, State, Zip Code) 227 Mazatlan St., Henderson, NV 89074 Beneficial Owner General and/or Check Box(es) that Apply: Promoter Executive Officer Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner **Executive Officer** General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner **Executive Officer** General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					B. I	NFORMAT	ION ABOU	T OFFERI	NG				
1	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									Yes	No		
••	1105 0110	100401 001	u, 01 4005 ii			Appendix				_		<u> </u>	L.
2.	What is	the minim	num investm			• •					,	\$	*************
2	3. Does the offering permit joint ownership of a single unit?									Yes	No		
3. 4.												Z	
•	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful	l Name (	Last name	first, if indi	ividual)									
Bu	siness or	Residence	Address (N	umber and	i Street, C	ity, State, 2	Zip Code)	<del></del>				<del></del>	
Naı	me of As	sociated B	roker or De	aler									<u>. ,</u>
Sta	tes in Wh	nich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers					<del>-</del>	
	(Check	"All State:	s" or check	individual	States)		•••••		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·····		All States	
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	ĪN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Ful	l Name (	Last name	first, if indi	ividual)			-						<del></del>
Bu	siness or	Residence	: Address (1	Number an	d Street, C	City, State,	Zip Code)						<del></del>
Nai	me of As	sociated B	roker or De	aler			· · · · · · · · · · · · · · · · · · ·		***************************************				
Sta	tes in Wh	nich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)		•••••					All States	
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (	Last name	first, if indi	vidual)			<del></del>		<del></del>		<del> ,</del>		<del></del>
Bus	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Na	me of As	sociated B	roker or De	aler	.,		<del></del>		<del> </del>		,		
Sta			Listed Has										1.6.
	(Check	"All State:	s" or check	ındividual	States)		•••••		•••••		***************************************	☐ Al	l States
	AL IL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI MS	ID MO
	MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	OR	MO PA
	RI										WI	WY	PR

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	: 		Amount Algorite
	Type of Security	Aggregate Offering Price	:	Amount Already Sold
	Debt			\$
	Equity	\$_30,000.00		\$ 30,000.00
	Convertible Securities (including warrants)	\$		\$
	Partnership Interests	\$		\$
,	Other (Specify)	\$		\$
	Total	\$_30,000.00		\$_30,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	:		Aggregate Dollar Amount of Purchases
	Accredited Investors		_	\$
	Non-accredited Investors	35	_	\$_30,000.00
	Total (for filings under Rule 504 only)	35		\$_30,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505			\$
	Regulation A		_	\$
	Rule 504	Common	_	\$ 30,000.00
	Total		_	\$_30,000.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	•		
	Transfer Agent's Fees			\$
	Printing and Engraving Costs			\$
	Legal Fees	•••••		\$
	Accounting Fees			\$_5,000.00
	Engineering Fees	•		\$ 5,000.00
	Sales Commissions (specify finders' fees separately)			\$
	Other Expenses (identify)		$\Box$	\$
	Total			\$ 10,000.00

	C. OFFERING PRICE, NUMB	ER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offerin and total expenses furnished in response to Part C — Q proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross	٠	\$
5.	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for any check the box to the left of the estimate. The total of t proceeds to the issuer set forth in response to Part 6	purpose is not known, furnish an estimate and he payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	[	<b>]</b> \$	<b>\$</b>
	Purchase of real estate	[		<u> </u>
	Purchase, rental or leasing and installation of mach and equipment		¬ \$	□\$
	Construction or leasing of plant buildings and facil	-		_
	Acquisition of other businesses (including the valu- offering that may be used in exchange for the assets issuer pursuant to a merger)	s or securities of another		
	Repayment of indebtedness	·	<del></del>	
	Working capital	_		
	Other (specify):		\$	\$
			] <b>\$</b>	\$
	Column Totals	Γ	\$ 20,000.00	<b></b>
	Total Payments Listed (column totals added)			0,000.00
		D. FEDERAL SIGNATURE		
sign	issuer has duly caused this notice to be signed by the u ature constitutes an undertaking by the issuer to furn information furnished by the issuer to any non-accre	ish to the U.S. Securities and Exchange Commis	sion, upon writte	
lssu	er (Print or Type)	Signature I	Date	
	e Spice Depot, Inc.	7: //.	October 19, 200	5 .
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
		Director & Secretary		

**ATTENTION** -

1.		2 presently subject to any of the disqualifi	
		See Appendix, Column 5, for state respons	se.
2.	The undersigned issuer hereby undertakes D (17 CFR 239.500) at such times as rec	•	state in which this notice is filed a notice on Form
3.	The undersigned issuer hereby undertake issuer to offerees.	es to furnish to the state administrators, upo	on written request, information furnished by the
4.	limited Offering Exemption (ULOE) of the		t must be satisfied to be entitled to the Uniform lerstands that the issuer claiming the availability tisfied.
	uer has read this notification and knows the c thorized person.	contents to be true and has duly caused this n	otice to be signed on its behalf by the undersigned
Issuer (	(Print or Type)	Signature	Date
The Sp	ice Depot, Inc.	Couldman	October 19, 2005
Name (	Print or Type)	Title (Print or Type)	

Director & Secretary

E. STATE SIGNATURE

#### Instruction:

Name (Print or Type)

Darrell Bowen

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AP	PENDIX					
1	Intendato non-a	1 to sell ccredited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	f investor and irchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL	<u> </u>									
AK										
AZ										
AR										
CA										
СО										
СТ										
DE										
DC										
FL										
GA										
НІ										
ID										
IL										
IN										
IA										
KS										
KY										
LA										
ME										
MD						, , , , , , , , , , , , , , , , , , , ,				
MA										
MI										
MN										
MS										
L	<u> </u>	L		<u></u>		l		<u> </u>	I	

### **APPENDIX** 2 3 4 1 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach offering price Type of investor and to non-accredited explanation of offered in state amount purchased in State waiver granted) investors in State (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Non-Accredited Accredited Yes No **Investors Investors** Yes No State **Amount** Amount MO MT NE Common \$30,000 NV X 35 \$30,000.00 X NH NJ NM NY NC ND OH OK OR PA RI SCSD TNTXUT VT VAWA $\mathbf{W}\mathbf{V}$ WI

			<u> </u>	APP	ENDIX								
1		2	3		4				1:6:				
	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State			amount purchased in State				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No				
WY													
PR													